Fill in this information to id	lentify your case:		
United States Bankruptcy Co	ourt for the:		
MIDDLE DISTRICT OF FLO	RIDA, ORLANDO DIVISION		
Case number (if known)		Chapter you are filing under:	
		Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		☐ Chapter 13	Check if this an amended
between them. In joint cases of the forms. Be as complete and accurat	s, one of the spouses must report in e as possible. If two married people	formation as <i>Debtor 1</i> and the other as <i>De</i> are filing together, both are equally respo	orm uses <i>Debtor 1</i> and <i>Debtor 2</i> to distinguish btor 2. The same person must be <i>Debtor 1</i> in a nsible for supplying correct information. If more and case number (if known). Answer every
Part 1: Identify Yourself			
	About Debtor 1:	About Debt	or 2 (Spouse Only in a Joint Case):
1. Your full name			
Write the name that is on your government-issued picture identification (for	First name	First name	
example, your driver's license or passport).	Middle name	Middle name	
Bring your picture	lei-a		
identification to your me	eting Last name and Suffix (Sr., Jr., II	III) Last name a	nd Suffix (Sr., Jr., II, III)

with the trustee.

Include your married or maiden names.

Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-2355

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Del	btor 1 Irizarry, Michael	·	Case number (# known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	441 Acacia Tree Way	If Debtor 2 lives at a different address:			
		Kissimmee, FL 34758-3683				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Osceola				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Det	otor 1 <u>Irizarry, Michael</u>					Case numb	er (if known)	
Par	t 2: Tell the Court About	our Bankı	ruptcy Cas	se				
7.	The chapter of the Bankruptcy Code you are			rief description of each, see Λ ne top of page 1 and check the			2(b) for Individual	s Filing for Bankruptcy (Form
	choosing to file under	Chapt	ter 7					
		☐ Chapt	ter 11					
		☐ Chapi	ter 12					
		☐ Chapt	ter 13					
8.	How you will pay the fee	abo	out how you	y is submitting your payment o	paying the	fee yourself, you may	pay with cash, ca	shier's check, or money order.
				the fee in installments. If your stallments (Official Form 103		his option, sign and at	tach the Application	nn for Individuals to Pay The
		not you	required to r family siz		so only if yo	our income is less than stallments). If you choo	150% of the offic se this option, you	7. By law, a judge may, but is ial poverty line that applies to I must fill out the Application
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District	Middile District of Florida Orlando Division	When		Case number	6:18-bk-03159-KSJ
			District		When	· · · · · · · · · · · · · · · · · · ·	 Case number 	
			District		When		_ Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by	■ No □ Yes.						
	an affiliate?							
			Debtor				Relationship to y	
			District		When		Case number, if I	
			Debtor District		When		Relationship to y Case number, if I	
			District		_ ******* .		Case number, in	
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
		☐ Yes.	Has you	ır landlord obtained an evicti	on judgmer	nt against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About an E	viction Judgment Agai	nst You (Form 10	1A) and file it as part of this

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Det	otor 1 Irizarry, Michael			Case number (if known)		
Par	t 3: Report About Any Bu	sinesses '	You Owπ as a Sole Proprie	tor		
12.	Are you a sole proprietor					
	of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of bu	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a		Number, Street, City, St	ate & ZIP Code		
	separate sheet and attach it to this petition.		Check the appropriate be	ox to describe your business:		
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))		
			Stockbroker (as	defined in 11 U.S.C. § 101(53A))		
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above	e		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Cha	opter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Anv	Hazardous Property or An	y Property That Needs Immediate Attention		
	Do you own or have any			,		
17.	property that poses or is	■ No. —				
	alleged to pose a threat of imminent and identifiable	☐ Yes.	What is the hazard?			
	hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
			The second secon			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
	· · · · · · · · · · · · · · · · · · ·			Number, Street, City, State & Zip Code		
	····					

eb	tor 1 Irizar <u>ry, Michael</u>				Case number (if known)
an	5: Explain Your Efforts	to Re	ceive a Briefing About Credit Counseling		
5.	Tell the court whether you have received a briefing about credit counseling.		nut Debtor 1: must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a		counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of
rece cred	The law requires that you receive a briefing about credit counseling before you		certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	If you file anyway, the court can dismiss your case, you will lose whatever filing fee		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
you	you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
			what exigent circumstances required you to file this case. Your case may be dismissed if the court is		Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
			dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed,		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			if any. If you do not do so, your case may be dismissed.		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:		I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity, I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a military combat zone.		Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.		If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Det	otor 1 <u> Irizarry, Michael</u>			Case number	er (if known)			
Par	t 6: Answer These Questi	ons for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily co individual primarily for a perso	insumer debts? Consumer debts are defining nal, family, or household purpose."	led in 11 U.S.C.§ 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	re that are not consumer debts or business of	debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.	THE PLANE BANK MALL. AT.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	■ 1-49		☐ 1,000-5,000	☐ 25,001-50,000			
	you estimate that you owe?	☐ 50-99)	□ 5001-10,000	□ 50,001-100,000			
	One	□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
		■ \$100,00 1 - \$500,000		550,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500.	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.		□ \$0 - \$		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		LJ \$500,	001 - \$1 million	ш \$100,000,001 - \$500 minon	Li More than \$50 billion			
Pari	t 7: Sign Below							
For	you	I have ex	amined this petition, and I decla	re under penalty of perjury that the information	on provided is true and correct.			
				I am aware that I may proceed, if eligible, able under each chapter, and I choose to pro-	under Chapter 7, 11,12, or 13 of title 11, United oceed under Chapter 7.			
			rney represents me and I did no ained and read the notice require	t pay or agree to pay someone who is not an ed by 11 U.S.C. § 342(b).	attorney to help me fill out this document, I			
		l request	relief in accordance with the cl	hapter of title 11, United States Code, spec	ified in this petition.			
		case can		oncealing property, or obtaining money or propring imprisonment for up to 20 years, or both.	roperty by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
		Michae	I Irizarry e of Debtor 1	Signature of Debtor	72			
		Executed	<u> </u>	Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

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Debtor 1 Irizarry, Michael		Case	e number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United States	Code, and have explained t	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the the required by 11 U.S.C. § 342(b) and, in a case in
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have petition is incorrect.	no knowledge after an inquir	y that the information in the schedules filed with the
	/s/ Flavio Alvarez Signature of Attorney for Debtor	Date	January 28, 2019 MM / DD / YYYY
	Flavio Alvarez		
	Law Office of Flavio E. Alvarez		
	911 N Main St Ste 8 Kissimmee, FL 34744-4520		
	Number, Street, City, State & ZIP Code Contact phone (407) 870-0015	Email address	alvarezlaw8@gmail.com
	39160 Bar number & State		

Debtor 1 Debtor 2 (Spouse, if filing) United States Bank	Michael Iriza First Name								
(Spouse, if filing)	First Name	A dissipate	e Name	Last Name					
(Spouse, if filing)		Middle	e Name	Last Name	1				
United States Bank	First Name	Middle	e Name	Last Name					
	cruptcy Court for	the: MIDDLE DI	ISTRICT	OF FLORIDA, ORLANDO DIVISION					
Case number		•				Γ.	Check if this is ar		
						L.	amended filing		
Official Fam	40CA/D								
Official For		•							
Schedule	A/B: Pr	roperty					12/15		
· · ·	ach Residence, Bu			Estate You Own or Have an interest in					
□ No. Go to Part 2	,		•						
Yes. Where is t	•				•				
1.1			What	is the property? Check all that apply					
. 1			-	Single-family home	Do not deduct secu	ed claim	s or exemptions. But		
441 Acacia	-		_	Duplex or multi-unit building the amount			deduct secured claims or exemptions. Put ount of any secured claims on Schedule D: rs Who Have Claims Secured by Property.		
Street address, it	available, or other des	cription		Condominium or cooperative	Creditors vvno riave	Cidilla	secured by Property.		
				Manufactured or mobile home					
Kissimmee	FL	34758-3683		Land	Current value of the entire property?		Current value of the portion you own?		
City	State	ZIP Code		Investment property	\$198,000.	00	\$198,000.00		
	0			Timeshare Other			r ownership interest		
			_	nas an interest in the property? Check one	 (such as fee simple, tenancy by the e a life estate), if known. 		cy by the entireties, or		
				Debtor 1 only	Fee Simple				
Country				Debtor 2 only					
County				Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is (see instructions)	s commu	ınity property		
			Other	information you wish to add about this ite rty identification number:					
							· · · · · · · · · · · · · · · · · · ·		
					-				
				our entries from Part 1, including any			\$198,000.00		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Debto	r1 <u>I</u>	izarry, Michael	Ca	ase number(if known)		
. Cai	s, vans,	trucks, tractors, sport utility vel	nicles, motorcycles			
	lo.					
_						
— 1	'es					
		Infiniti	Miles have an interest in the assessment in Occupant	Do not deduct secu	ıred cla	ims or exemptions. Put
3.1	Make:		Who has an interest in the property? Check one	the amount of any s	secured	d claims on <i>Schedule D:</i>
	Model:	G35	■ Debtor 1 only	Creditors Who Hav	e Clain	ns Secured by Property.
	Year:	2004 nate mileage: 70000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	10	Current value of the portion you own?
		ormation:	At least one of the debtors and another	endre property		portion you own:
I		NKCV56E74M805265	Actions of the deplots and another			
		11.0.1012.1.411.0302.03	☐ Check if this is community property (see instructions)	\$6,000.	00	\$6,000.0
3.2	Make:	Toyota	Who has an interest in the property? Check one			ims or exemptions. Put
	Model:	4Runner 2WD	Debtor 1 only			d claims on Schedule D: ns Secured by Property.
	Year:	2004	Debtor 2 only			, , ,
		nate mileage: 280000	Debtor 1 and Debtor 2 only	Current value of ti entire property?	10	Current value of the portion you own?
		formation:	At least one of the debtors and another			
	VIN: J	TEZU14R740018409				
			☐ Check if this is community property	\$3,000.	.00	\$3,000.00
ļ			(see instructions)			
4.1	Make:	Seadoo	Who has an interest in the property? Check one			ims or exemptions. Put
	Model:	Jetski	Debtor 1 only			d claims on Schedule D: as Secured by Property.
	Year:	2006	Debtor 2 only	Current value of th	10	Current value of the
			☐ Debtor 1 and Debtor 2 only	entire property?		portion you own?
	Other inf	ormation:	At least one of the debtors and another		_	
	ID NO.	YDV51980D606	☐ Check if this is community property (see instructions)	\$400.0	<u>0</u>	\$400.00
4.2	Make:	Seadoo	Who has an interest in the property? Check one	Do not deduct secu	red cla	ims or exemptions. Put
	Model:	Jetski	■ Debtor 1 only			I claims on Schedule D: is Secured by Property.
	Year:	2006	Debtor 2 only	Current value of th		Current value of the
			Debtor 1 and Debtor 2 only	entire property?		portion you own?
	Other inf	ormation:	\square At least one of the debtors and another			
	ID NO	YDV56204E606	Check if this is community property	\$0.0	0_	\$0.00
		124302042000	(see instructions)			
				_		
Ad	d the do	llar value of the portion you own	for all of your entries from Part 2, including any	entries for pages		
.yo	ı have a	ttached for Part 2. Write that nur	mber here	=>		\$9,400.00
	_			L.		
art 3:	Descrit	e Your Personal and Household Ite	ms			
o yo	u own o	r have any legal or equitable inte	erest in any of the following items?			urrent value of the
						ortion you own? to not deduct secured
						aims or exemptions.
Hou	sehold (goods and furnishings	shina kitahanyara			
EX:		Major appliances, furniture, linens, c	ына, киспен w аге			
	vo /es. Des	coriba				
	res. Des	scribe				

Official Form 106A/B

Debtor 1 Irizarry,	, Michael Case number (if known)	
	Master Bedroom: Bed, 2 night stands, Dresser	\$200.00
	Second Bedroom: Bed, mirror, Dresser	\$150.00
*****	Third Bedroom: Bed, 2 night tables	\$150.00
	Fourth Bedroom: Desk	\$50.00
	Family: Couch	\$150.00
	Dinning Room: Table with Six Chairs	\$200.00
includin No Yes. Describe 8. Collectibles of value		
collection No Yes. Describe 9. Equipment for sport	ons, memorabilia, collectibles rts and hobbies chotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and ents	
10. Firearms Examples: Pistols, ■ No □ Yes. Describe	, rifles, shotguns, ammunition, and related equipment	
11. Clothes Examples: Everyda □ No ■ Yes. Describe	ay clothes, furs, leather coats, designer wear, shoes, accessories	
	Clothes	\$150.00
■ No □ Yes. Describe 13. Non-farm animals Examples: Dogs, c	cats, birds, horses	silver
☐ Yes. Describe 14. Any other persona ■ No ☐ Yes. Give specifi	al and household items you did not already list, including any health aids you did not list	
	alue of all of your entries from Part 3, including any entries for pages you have attached for the things of the company of th	\$1,050.00

Part 4: Describe Your Financial Assets

D	ebtor 1 <u>Irizarry, Michael</u>		Case number (if known)	
D	o you own or have any legal or e	quitable interest in any o	f the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	. Cash Examples: Money you have in yo ■ No □ Yes	•	safe deposit box, and on hand when you file your petition	
17	institutions. If you ha	•	ertificates of deposit; shares in credit unions, brokerage hou the same institution, list each.	uses, and other similar
	☐ No ■ Yes		Institution name:	
	17.1.	Checking Account	Partners Federal Credit Union	\$85.00
18	Bonds, mutual funds, or public Examples: Bond funds, investme ■ No □ Yes			
19	. Non-publicly traded stock and joint venture ■ No	interests in incorporated	and unincorporated businesses, including an interest	in an LLC, partnership, and
	☐ Yes. Give specific information Na	about them me of entity:	% of ownership:	
20	Non-negotiable instruments are t ■ No □ Yes. Give specific information a	ersonal checks, cashiers' c hose you cannot transfer to	and non-negotlable Instruments hecks, promissory notes, and money orders. someone by signing or delivering them.	
21	Retirement or pension account Examples: Interests in IRA, ERIS No		thrift savings accounts, or other pension or profit-sharing	plans
	☐ Yes. List each account separate	ely. of account:	Institution name:	
22	Examples: Agreements with land No	you have made so that you	ı may continue service or use from a company tilities (electric, gas, water), telecommunications companies	, or others
22	Yes	is normant of manage to you	Institution name or individual:	
23	■ No	ne and description.	, ettier for life of for a number of years)	
24.	26 U.S.C. §§ 530(b)(1), 529A(b), a		I ABLE program, or under a qualified state tuition prog	ram,
	■ No ☐ Yes Institution n	ame and description. Sepa	rately file the records of any interests.11 U.S.C. § 521(c):	
25.	■ No	, , ,	an anything listed in line 1), and rights or powers exer	cisable for your benefit
26.	☐ Yes. Give specific information Patents, copyrights, trademarks Examples: Internet domain names	s, trade secrets, and othe	r intellectual property royalties and licensing agreements	
∩ff	■ No icial Form 106A/B		nedule A/B: Property	n 4
UII	GIGI FUITH TOUND	Sun	icanie v.n. Lióheità	page 4

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D	ebtor 1	irizarry, Michael	Case number (if known)	
	☐ Yes	s. Give specific information about them		
27	Exam ■ No		ve association holdings, liquor licenses, professional licenses	
	⊔ Yes	s. Give specific information about them		
M	oney o	r property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28		efunds owed to you		
	■ No □ Yes	Give specific information about them, including whe	ether you already filed the returns and the tax years	
29	Exan ■ No	y support nples: Past due or lump sum alimony, spousal support Give specific information	ort, child support, maintenance, divorce settlement, property se	ttlement
30		amounts someone owes you nples: Unpaid wages, disability insurance payments, of unpaid loans you made to someone else	disability benefits, sick pay, vacation pay, workers' compensation	n, Social Security benefits;
	☐ Yes	. Give specific information		
31.	Exam ■ No		gs account (HSA); credit, homeowner's, or renter's insurance	
	□ Yes.	. Name the insurance company of each policy and lis Company name:	t its value. Beneficiary:	Surrender or refund value:
32.	If you died.	nterest in property that is due you from someone are the beneficiary of a living trust, expect proceeds . Give specific information	e who has died from a life insurance policy, or are currently entitled to receive pro	
33.		s against third parties, whether or not you have to apples: Accidents, employment disputes, insurance cl		
		. Describe each claim		
	■ No		ure, including counterclaims of the debtor and rights to set	off claims
		. Describe each claim		
	■ No	nancial assets you did not already list Give specific information		
36		the dollar value of all of your entries from Part 4 4. Write that number here	including any entries for pages you have attached for	\$85.00
Pa	rt 5: De	escribe Any Business-Related Property You Own or Ha	ive an Interest In. List any real estate in Part 1.	
		own or have any legal or equitable interest in any busi	ness-related property?	
_	_	o to Part 6. Go to line 38.		

Official Form 106A/B

Schedule A/B: Property

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Deb	tor 1	Irizarry, Michael		Case number (if known)				
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.				
		own or have any legal or equitable interest in any farm- o	r commercial fishing	-related property?				
	No.	Go to Part 7.						
	☐ Yes.	Go to line 47.						
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above					
		have other property of any kind you did not already list? les: Season tickets, country club membership						
	l No	, ,						
	Yes.	Give specific information						
		he dollar value of all of your entries from Part 7. Write that	number here		\$0.00			
Part	8:	List the Totals of Each Part of this Form						
55.	Part 1	: Total real estate, line 2			\$198,000.00			
56.	Part 2	: Total vehicles, line 5	\$9,400.00					
57.	Part 3	: Total personal and household items, line 15	\$1,050.00					
58.	Part 4	: Total financial assets, line 36	\$85.00					
59.	Part 5	: Total business-related property, line 45	\$0.00					
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00					
61.	Part 7	: Total other property not listed, line 54 +	\$0.00					
62.	Total	personal property. Add lines 56 through 61	\$10,535.00	Copy personal property tota	\$10,535.00			
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$208,535.00			

Official Form 106A/B

Schedule A/B: Property

Fill in th	nis information to identify y	your case:				
Debtor 1	Michael Irizarry					
	First Name	Middle Name	ï	Last Name	}	
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	ankruptov Court for the:	MIDDLE DISTRICT OF FLO	RIDA	, ORLANDO DIVISION		
	_			•		
(if known)	First Name Middle Name Last Name Las			Check if this is an amended filing		
Official Fa	4000					
Schedu	e C: The Pro	perty You Cla	im	as Exempt		4/16
property you listed out and attach to knowп).	d on <i>Schedule A/B: Property</i> this page as many copies of	(Official Form 106A/B) as yo Part 2: Additional Page as no	our sou ecessa	urce, list the property that you claim ary. On the top of any additional pag	as exempt. I ges, write you	f more space is needed, fill r name and case number (if
specific dollar a applicable statu funds—may be to a particular d	mount as exempt. Alternat tory limit. Some exemptior unlimited in dollar amount ollar amount and the value	ively, you may claim the fu is—such as those for heal . However, if you claim an	ıll fair th aid exem	market value of the property be is, rights to receive certain bene ption of 100% of fair market valu	ing exempte fits, and tax- e under a la	ed up to the amount of any exempt retirement w that limits the exemption
Part 1: Ident	ify the Property You Claim	as Exempt				
1. Which set o	f exemptions are you clain	ning? Check one only, even	if you	r spouse is filing with you.		
You are c	laiming state and federal non	bankruptcy exemptions. 11	U.S.C	;, § 522(b)(3)		
_		•		•		
	-	-	mnt f	fill in the information helow		
Brief descrip	tion of the property and line o	n Current value of the	•		Specific !	aws that allow exemption
	,	Copy the value from	Che	eck only one box for each exemption.		
		\$6,000.00		\$4,000.00	Fla. Sta	it. § 222.25(4)
				100% of fair market value, up to	-	
	bodula 4/D 3 4			any applicable statutory limit		
Line nom 30	medule A/B, 3.1					
		\$6,000.00		\$1,000.00	Fla. Sta	it. § 222.25(1)
				100% of fair market value, up to	-	
	hadel- 602 9 4			any applicable statutory limit		
Line from Sc	nedule A/B. 3.1					
		\$200.00		\$200.00	Fla. Co	nst. Art X, § 4(a)(2)
•					-	
	edroom: Bed, mirror,	\$150.00	-	\$150.00	Fla. Co	nst. Art X, § 4(a)(2)
	hedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	•	
	room: Bed, 2 night tabl	es \$150.00	•	\$150.00	Fla. Co	nst. Art X, § 4(a)(2)
Ente HOIII QC						

Official Form 106C

☐ 100% of fair market value, up to any applicable statutory limit

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
-	Fourth Bedroom: Desk Line from Schedule A/B: 6.4	\$50.00		\$50.00	Fla. Const. Art X, § 4(a)(2)	
	ane nom schedule A.B. V			100% of fair market value, up to any applicable statutory limit		
	Family: Couch ine from Schedule A/B: 6.5	\$150.00		\$150.00	Fla. Const. Art X, § 4(a)(2)	
·	Line Roll Schedule Alb. 9.9			100% of fair market value, up to any applicable statutory limit		
	Dinning Room: Table with Six Chairs	\$200.00		\$150.00	Fla. Const. Art X, § 4(a)(2)	
Line from Schedule A/B: 6.6		****		100% of fair market value, up to any applicable statutory limit		
	Clothes ine from Schedule A/B: 11.1	\$150.00		\$150.00	Fla. Const. Art X, § 4(a)(2)	
	ine non schedule Ads. The			100% of fair market value, up to any applicable statutory limit		
-	Partners Federal Credit Union ine from Schedule A/B: 17.1	\$85.00		\$85.00	Fla. Stat. § 222.11(2)(a)	
Line from Schedule AVB: 17.1				100% of fair market value, up to any applicable statutory limit		
(Are you claiming a homestead exemption o Subject to adjustment on 4/01/19 and every 3 y	ears after that for case	s filed	•		
ı	 ☐ Yes. Did you acquire the property covered ☐ No 	by the exemption within	1,21 ו	5 days before you filed this case?		
	☐ Yes					

Fill in this informa	ation to identi	fy your case:				
Debtor 1 Mich	ael Irizarry	Middle Name	Last Name			
Debtor 2		Made Name	20017107710			
(Spouse if, filing) First Na	me	Middle Name	Last Name			
United States Bankruptcy (Court for the:	MIDDLE DISTRICT OF FLORII	DA. ORLAND	O DIVISION		
Case number						
(if known)						if this is an
					amend	led filing
Official Form 106E)					
	_	Who Have Claims	Cacura	d by Proports	•	12/15
acuedale p: Ci	euitors	WIIO NAVE CIAIMS	3ecure	u by Property	<u> </u>	12/15
		two married people are filing togethe				
needed, copy the Additional I known).	Page, fill it out,	number the entries, and attach it to t	this form. On ti	he top of any additional p	ages, write your name	and case number (ii
1. Do any creditors have claim	ns secured by t	your property?				
_		form to the court with your other so	chedules. You	have nothing else to rec	ort on this form.	
_		·	siledules. Tou	that o thou may once to top		
Yes. Fill in all of the		low.				
Part 1: List All Secured	d Claims			Column A	Column B	Column C
		ore than one secured claim, list the creat particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
		order according to the creditor 's nam		Do not deduct the	that supports this	portion
Od FOLLander Sand	!!	Doggrifes the avenuety that acquery	ha alaimi	value of collateral.	claim	If any
2.1 FCI Lender Service Creditor's Name		Describe the property that secures t		<u>\$71,704.62</u>	\$198,000.00	\$71,704.62
• • • • • • • • • • • • • • • • • • • •		441 Acacia Tree Way, Kissii FL 34758-3683	mnee,			
	. [
PO Box 27370		As of the date you file, the claim is: apply.	Check all that			
Anaheim, CA 928		☐ Contingent				
Number, Street, City, State	& Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check	one.	Nature of Iten. Check all that apply.				
Debtor 1 only		 An agreement you made (such as r car loan) 	nortgage or sec	cured		
Debtor 2 only						
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the debtors Check if this claim relates		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)				
community debt	s to a	Citier (including a right to diset)				
•						
Date debt was incurred		Last 4 digits of account numb	per <u>1031</u>			
2.2 Select Portfolio		Describe the property that secures t	he claim:	\$212,533.00	\$198,000.00	\$14,533.00
Creditor's Name		441 Acacia Tree Way, Kissir		,000.00		4.4,000.00
Attn: Bankruptcy		FL 34758-3683	mice,			
PO Box 65250						
Salt Lake City, UT		As of the date you file, the claim is: apply.	Check all that			
84165-0250		☐ Contingent				
Number, Street, City, State 8		Unliquidated				
Miles awas the debt? Cheek		☐ Disputed Nature of lien. Check all that apply.				
Who owes the debt? Check		_		ad		
Deptor 1 only		 An agreement you made (such as r car loan) 	nortgage or sec	urea		*
Debtor 2 only Debtor 1 and Debtor 2 only		·	hania'a liant			
At least one of the debtors		□ Statutory lien (such as tax lien, med □ Judgment lien from a lawsuit	aranic s iien)			
Check if this claim relates		Other (including a right to offset)				
community debt						<u> </u>

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Debtor	1 Michael Iriza	arry		Case number (f known)		
	First Name	Middle Name	Last Name	·		
Arld the	dollar value of you	r entries in Column A on thi	s page. Write that number here:	\$284,237.62		
lf this i	•	ur form, add the dollar valu	• • •	\$284,237.62		
Part 2:	List Others to E	Be Notified for a Debt Tha	at You Already Listed			
trying t	o collect from you fo e creditor for any of	or a debt you owe to someo	ne éise, list the creditor in Part 1	nat you already listed in Part 1. For ex , and then list the collection agency f ors here. If you do not have additional	nere. Similarly, if you have more	
:	Name, Number, Stree Select Portfolio 10401 Deerwoo			On which line in Part 1 did you enter the		
	Jacksonville, Fl			Last 4 digits of account number 942	J	

Fill	in this infor	mation to identify you	r case:							
Debtor	r 1	Michael Irizarry								
ļ		First Name	Middle N	ame		Last Name			` }	
Debtor		First Name	Middle M	lama.		Lost Name		_		
(Spouse	и, ашоду	First Name	Magne IA	ame		Lastivallie				
United	States Bank	ruptcy Court for the:	MIDDLE DIS	STRICT O	F FLORID	A, ORLANDO	DIVISIO	<u> </u>	,	
Case	number									
(if know				-						☐ Check if this is an
<u> </u>										amended filing
O#:-	ial Causa	106E/E								
				11		Ol-:				40/45
D: Credi the Con	itors Who Hav tinuation Pag mber (if know	ve Claims Secured by Pro e to this page. If you hav n).	operty. If more e no informati	space is n on to repor	needed, cop	y the Part you	need, fill it	out, numbe	r the entries is	the boxes on the left. Attach
	<u> </u>									
_	-	• •	· Classific agains	re you.						
		12.								
		of Vaur NONDRIORITY	/ Unggovered	Claime						
					···········		· · · · · · · · · · · · · · · · · · ·			
_	•	. ,	•	,						
	No. You have	nothing to report in this pa	irt. Supmit this f	orm to the c	court with yo	our other sched	ules.			
	Yes.									
uns tha	secured claim,	list the creditor separately	for each claim.	For each d	laim listed, i	dentify what typ	e of claim it	is. Do not lis	t claims alread;	y included in Part 1. If more
										Total claim
	Associati	ion of Poinciana Vi	llages,							****
4.1	Inc.	reditor's Name		Last 4 dig	its of acco	unt number		<u>. </u>		\$689.53
	c/o Larse 300 S Ora	n & Assoc., P.L. ange Ave Ste 1575		When was	s the debt l	ncurred?				
	,			As of the	date you fil	le, the claim is:	: Check all t	hat apply		
	First Name Middle Name Last Name blood 2 use of , fling) First Name Middle Name Last Name ted States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA, ORLANDO DIVISION see number cover) Check if this is an amended filing ficial Form 106E/F hedule E/F: Creditors Who Have Unsecured Claims 12/15 s complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other part to executory contracts or unexplired leases that could result in a claim. Also list executory contracts or inchapter deleases that could result in a claim. Also list executory contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule reditors Who Have Claims Secured by Property; if more space is needed, copy the Part you need, fill it out may be reditioned to the part of									
	Debtor 1	only		☐ Conting	gent					
	Debtor 2	only								
				•						
		•	ther			TY unsecured o	claim:			
	☐ Check if	this claim is for a comm	unity	☐ Studen	nt loans					
		subject to offset?	•				ition agreen	nent or divord	e that you did r	not
	■ No			☐ Debts t	ta pension a	r profit-sharing	plans, and	other similar	debts	
	☐ Yes			Other.	Specify					

Debtor	1 Irizarry, Michael	Case number (f known)	
4.2	ATT Directv Nonpriority Creditor's Name	Last 4 digits of account number 5515	\$358.00
		When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number 9879	\$251.00
	Attn: General	When was the debt incurred?	
	Correspondence/Bankruptcy PO Box 30285		
	Salt Lake City, UT 84130-0285		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student ioans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority daims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Coastal Dental Services	Last 4 digits of account number 1573	\$339.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	
	50	— Onler, specify	

Debto	1 Irizarry, Michael	Case number (f known)	
4.5	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number 8754	\$427.00
	ATTN: Bankruptcy PO Box 98873 Las Vegas, NV 89193-8873	When was the debt incurred? 2017-03	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	t you did not
	is the claim subject to offset?	report as priority daims Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.6	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number 3536	\$875.00
	Attn: Bankruptcy PO Box 5524 Sioux Falls, SD 57117-5524	When was the debt incurred? 2013-02-13	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	 ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans 	
	debt Is the claim subject to offset? —	☐ Obligations arising out of a separation agreement or divorce tha report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Revolving account	
		— Offici. Openiny	
4.7	Gastro Associates of Osceola Nonpriority Creditor's Name	Last 4 digits of account number 1058	\$312.00
		When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	; you did not
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		— Viliel. Specify	

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Debtor	1 Irizarry, Michael	· · · · · · · · · · · · · · · · · · ·	Case number (1 known)	·
4.8	Infinity Indemnity Insurance C Nonpriority Creditor's Name	Last 4 digits of account number	7489	\$123.00
	, ,	When was the debt incurred?	2016-07	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	Check if this claim is for a community	Student loans		
	debt	- - ·	ation agreement or divorce that you did not	
	is the claim subject to offset?	report as priority daims Debts to pension or profit-sharing	plane, and other similar debte	
	■ No	• • • • •		
	Yes	Other. Specify Open accou	<u>Int</u>	
4.9	Infinity Indemnity Insurance C	Last 4 digits of account number	7489	\$123.00
	Nonpholity Creditor's Name	When was the debt incurred?	2016-07	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separa report as priority daims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Open accou	nt	
	The Law Office of Paul A. Krasker,		1111 - 11 - 11 - 11 - 11 - 11 - 11 - 1	
4.10	P.A. Nonpriority Creditor's Name	Last 4 digits of account number		\$840.00
	Nonpronty Creditor's Name	When was the debt incurred?		
	1615 Forum PI FI 5 West Palm Beach, FL 33401-2320 Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	,,,,,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		ition agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	plane, and other similar debte	
	■ No			
	Yes	Other. Specify		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Iriz	arry, I	Michael		Case n	number (f known)	
Awa Collect	ions		Line 4.4 of (Check one):	☐ Part 1:	Creditors with Priority Unsecured Claims	
PO Box 660				Part 2:	Creditors with Nonpriority Unsecured Claims	
Orange, CA	92863	3-66 0 5	Last 4 digits of account number	19	573	
Name and Addre	988		On which entry in Part 1 or Part 2 did	you list the o	original creditor?	
	Credit Collection Serv		Line 4.8 of (Check one):	☐ Part 1:	Creditors with Priority Unsecured Claims	
725 Canton St Norwood, MA 02062-2679		62 2670		■ Part 2:	Creditors with Nonpriority Unsecured Claims	
		62-20 <i>13</i>	Last 4 digits of account number 7489			
Name and Addre	ess		On which entry in Part 1 or Part 2 did	you list the o	original creditor?	
Credit Colle		Serv	Line 4.9 of (Check one):	☐ Part 1:	Creditors with Priority Unsecured Claims	
725 Canton Norwood, M		62 2670		Part 2:	Creditors with Nonpriority Unsecured Claims	
MOIWOOU, IV	M 020	02-2013	Last 4 digits of account number	74	489	
Name and Addre	958		On which entry in Part 1 or Part 2 did	you list the o	original creditor?	
First Premie			Line 4.6 of (Check one):	☐ Part 1:	Creditors with Priority Unsecured Claims	
3820 N Loui		=		■ Part 2:	Creditors with Nonpriority Unsecured Claims	
Sioux raiis,	Sioux Falls, SD 57107-0145		Last 4 digits of account number	3	536	
Name and Addre	ess		On which entry in Part 1 or Part 2 did	you list the o	original creditor?	
Fox Collecti		nter	Line 4.7 of (Check one):		Creditors with Priority Unsecured Claims	
454 Moss Tr	•	37072-2029	•	■ Part 2:	Creditors with Nonpriority Unsecured Claims	
Goodlettsvii	11 6 , 114	37012-2023	Last 4 digits of account number	10	058	
Name and Addre	ess		On which entry in Part 1 or Part 2 did			
I C Systems			Line 4.2 of (Check one):		Creditors with Priority Unsecured Claims	
PO Box 643 Saint Paul, I		16/-0378		Part 2: (Creditors with Nonpriority Unsecured Claims	
Odilit i dai, i		104-0070	Last 4 digits of account number	55	515	
Part 4: Add	the Ar	nounts for Each Type of I	Insecured Claim			
6. Total the amo	unts of	certain types of unsecured c		al reporting	purposes only. 28 U.S.C. §159. Add the amounts for each	
type of unsec	ured cla	ım.			Total Claim	
	6a.	Domestic support obligation	ins	6a.	Total Claim \$ 0.00	
Total claims	•••				<u> </u>	
from Part 1	6b.		bts you owe the government	6b.	\$	
	6c.	•	al injury while you were intoxicated	6c.	\$ 0.00	
	6d.	Other. Add all other priority t	insecured daims. Write that amount here	e. 6d.	\$	
	6e.	Total Priority. Add lines 6a t	hrough 6d.	6e.	\$	
					Total Claim	
	6f.	Student loans		6f.	\$0.00	
Total claims						

from Part 2

6g.

6h.

6i.

6j.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

0.00

0.00

4,337.53

4,337.53

6h.

6i.

here.

	Fill in th	is information to identil	v vour caso:			
D - 1-4			y your case.			4
Debto	or 1	Michael Irizarry First Name	Middle Na	me I	ast Name	}
Debte						
(Spous	e if, filing)	First Name	Middle Nar		ast Name	
Unite	d States Ba	nkruptcy Court for the:	MIDDLE DIS	TRICT OF FLORIDA	ORLANDO DIVISION	
	number					
(if knov	vn)			•		☐ Check if this is an amended filing
			· · · · · · · · · · · · · · · · · · ·			amended lilling
○ #:	-:-! [-	106C				
		rm 106G	. 04		!	
					expired Leases	12/15
					ogether, both are equally respons umber the entries, and attach it t	
additi	onal pages,	, write your name and o	ase number (if	known).		, -
1. 0	o you have	any executory contra	ts or unexpire	d leases?		
I	No. Check	k this box and file this for	n with the court	with your other sched	ules. You have nothing else to repo	rt on this form.
	3 Yes. Fill in	all of the information bel	ow even if the co	ontacts of leases are I	isted on Schedule A/B:Property(Of	ficial Form 106 A/B).
					tract or lease. Then state what ea	
	xample, rei nexpired lea	•	ione). See the ir	nstructions for this for	m in the instruction booklet for more	examples of executory contracts and
	noxpirou iou					•
	Person or	company with whom ye	ou have the co	ntract or lease	State what the contract or lease	e is for
- 2.4		Name, Number, Street, City				
2.1	Name				-	
	Number	Street			-	
	City		State	ZIP Code	-	
2.2	-				-	
	Name					
	Number	Street			-	
	0:4		D1-4-	710.0-1-	-	•
2.3	City		State	ZIP Code		
	Name				-	
		01			-	
	Number	Street				
	City		State	ZIP Code	-	
2.4	Name				-	
	Number	Street			-	
	City		State	ZIP Code	-	
2.5					-	
	Name					
	Number	Street				
			•			
	City		State	ZIP Code		

Fill	in this information to identi	fy your case:			
Debtor 1	Michael Irizarry	LEAG-No.	N and Nia and		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA, ORLANDO I	DIVISION	
Case numb	er				
(if known)				☐ Check if this is an	
				amended filing	
Official	Form 106H				
	ule H: Your Cod	ahtors		12/15	
ocneu	ule II. Toul Cou	CDIOIS		12/13	
are filing to and number	gether, both are equally resp	ponsible for supplying co the left. Attach the Addit	rrect information, If m	complete and accurate as possible. If two married peolore space is needed, copy the Additional Page, fill it out e. On the top of any Additional Pages, write your name a	t.
1. Do y	ou have any codebtors? (If	you are filing a joint case, d	o not list either spouse a	s a codebtor.	
■ No					
☐ Yes					
Califorr —	nia, Idaho, Louisiana, Nevada,			y? (Community property states and territories include Arizon nd Wisconsin.)	a,
	Go to line 3. Did your spouse, former spou	se, or legal equivalent live w	vith you at the time?		
line 2 a	gain as a codebtor only if th Schedule E/F (Official Form	iat person is a guarantor	or cosigner. Make sur-	if your spouse is filing with you. List the person shown e you have listed the creditor on Schedule D (Official Fo se Schedule D, Schedule E/F, or Schedule G to fill out	
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
3.1				☐ Schedule D, line	
	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
<u> </u>	lumber Street			_	
C	City	State	ZIP Code		
3.2				Schedule D, line	_
	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
- N	lumber Street				
	iity	State	ZIP Code		

Fill	in this information to	identify your cas	se:							
De	btor 1	Michael Iriza	rry			_				
1	btor 2 ouse, if filing)				w	_				
Un	ited States Bankrupt	cy Court for the:	MIDDLE DISTRICT C DIVISION	F FLORIDA, ORL	ANDO	_				
(If ki	se number nown)						Check if this is An amende A supplement income as	ed filing ent showing	- •	chapter 13
	fficial Form						MM / DD/ Y	YYY		
S	chedule I: \	Your Inco	me							12/15
sup spo atta	plying correct infor use. If you are sepa ch a separate sheet	mation. If you ar trated and your	ile. If two married peop re married and not filin spouse is not filing wit n the top of any additio	g jointly, and you h you, do not inc	ır spouse is lude inform	i living v ation ab	vith you, included out your spou	de informa se. If mor	ation about y e space is ne	our eded,
1.	Fill in your emplo information.	yment		Debtor 1			Debtor :	or non-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Empl	oyed			
	attach a separate p information about		Employment status	☐ Not employe	ed		☐ Not e	mployed		
	employers.		Occupation	Bartender						
	Include part-time, self-employed work		Employer's name	Springs Foo	d Service,	LLC.		-		
	Occupation may in homemaker, if it ap		Employer's address	PO Box 2213 Lake Buena 32830-2136						
			How long employed th	nere? 10 y	ears					
Pai	rt 2: Give Det	ails About Monti	hly Income							
	mate monthly incors		e you file this form. If y	ou have nothing to	report for an	ıy line, wı	ite \$0 in the spa	ace. Includ	e your non-filii	ng spouse
	u or your non-filing sp ce, attach a separate		than one employer, comb	pine the information	n for all empl	oyers for	that person on	the lines b	elow. If you ne	ed more
						Fo	r Debtor 1		btor 2 or ng spouse	
2.			, and commissions (be culate what the monthly v		2.	\$	3,389.66	\$	N/A	
3.	Estimate and list	monthly overtim	ne pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Ir	ncome. Add line	2 + line 3.		4.	\$	3,389.66	\$	N/A	

Deb	tor 1	Irizarry, Michael	_	Case r	iumber (if known)			
				For I	Debtor 1		otor 2 or ng spouse	
	Cop	y line 4 here	4.	\$	3,389.66	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	513.57	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	484.32	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$ <u> </u>	N/A	
	5e.	Insurance	5e.	\$	479.77	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	35.53	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$ <u></u>	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,513.19	\$	N/A	
7.	Cak	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,876.47	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	š	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8đ.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Calc	sulate monthly income. Add line 7 + line 9.	10. \$	1	,876.47 + \$	N	VA = \$ 1,	876.47
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		•		<u>``</u>		
11.	Inclu other	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your der friends or relatives. In our destruction of include any amounts already included in lines 2-10 or amounts that are not avairly:	ependent	. •		Schedule	<i>I.</i> 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The results amount on the Summary of Schedules and Statistical Summary of Certain					Combined	
13	Dov	ou expect an increase or decrease within the year after you file this form?	?				monthly in	icome
		No.	-					
		Yes, Explain:						

Official Form 106I

Fill	in this information to identify you	ur case:					
Det	otor 1 Michael Iriza	rry			Chec	k if this is:	
					_	An amended filing	dan araka sistan abansa 40
1	otor 2 ouse, if filing)					A supplement snow expenses as of the	ring postpetition chapter 13 following date:
Unit	ted States Bankruptcy Court for the:	MIDDLE	E DISTRICT OF FLORIDA ON	ORLANDO	7	MM / DD / YYYY	
	e number nown)						
0	fficial Form 106J			,			
S	chedule J: Your E	xpen	ses				12/15
infe	as complete and accurate as pormation, if more space is neeknown), Answer every question	ded, attac					
Par 1.	t 1: Describe Your Housel Is this a joint case?	rold					
١.	■ No. Go to line 2. □ Yes. Does Debtor 2 live in	a sonara	te household?				
	□ No	-	al Form 106J-2,Expenses t	or Separate Househo	old of Debtor	2.	
2.	Do you have dependents?	■ No					
۷.	•	_	Fill out this information for	Dependent's relation	nehin ta	Dependent's	Does dependent
	Do пot list Debtor 1 and Debtor 2.	☐ Yes.	each dependent	Debtor 1 or Debtor		age Dependent s	live with you?
	Do not state the dependents names.						□ No □ Yes □ No
							☐ Yes ☐ No
							□ No □ Yes
							□ No
_							☐ Yes
3.	Do your expenses include expenses of people other the yourself and your dependen	an 🖂	No Yes				
Est exp	Estimate Your Ongoin imate your expenses as of you penses as of a date after the ballicable date.	ur bankru	ptcy filing date unless yo	u are using this forr mental <i>Schedule J</i> ,	n as a supp check the l	lement in a Chapt oox at the top of ti	ter 13 case to report he form and fill in the
val	lude expenses paid for with no ue of such assistance and hav ficial Form 106l.)					Your exp	anses
4.	The rental or home ownersh payments and any rent for the g			clude first mortgage	4. \$	***************************************	1,292.18
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner's,	or renter's	insurance		4b. \$		0.00
	4c. Home maintenance, rep				4c. \$		0.00
5.	4d. Homeowner's association			e equity loans	4d. \$ 5. \$		23.00
v.	Additional mortgage paymer	us ioi yo	ur residence, such ds HUIII	ic equity teatto	p		0.00

Deb	otor 1	Irizarry,	Michael	Case number (if known)	
6.	Utiliti	ioe·			
υ.	6a.		, heat, natural gas	6a. \$	125.00
	6b.	•	wer, garbage collection	6b. \$	35.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c. \$	145.00
	6d.	Other, Spe	, ,	6d. \$	0.00
7.			ekeeping supplies	7. \$	300.00
8.			children's education costs	8. \$	0.00
9.			Iry, and dry cleaning	9. \$	0.00
		-	products and services	10. \$	0.00
11.			ental expenses	11. \$	0.00
			. Include gas, maintenance, bus or train fare.	· · · · · · · · · · · · · · · · · · ·	
			ar payments.	12. \$	200.00
13.	Enter	rtainment,	clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14.	Char	Itable cont	tributions and religious donations	14. \$	0.00
15.	Insur	ance.		· · · · · · · · · · · · · · · · · · ·	
			nsurance deducted from your pay or included in lines 4 or		
		Life insura		15a. \$	0.00
		Health ins		15b. \$	0.00
		Vehicle ins		15c. \$	121.76
			urance. Specify:	15d. \$	0.00
16.			actude taxes deducted from your pay or included in lines 4 or		0.00
47	Speci			16. \$	0.00
17.			ease payments: ents for Vehicle 1	17a. \$	0.00
		, -	ents for Vehicle 2	17b. \$	0.00
		Other. Spe		17c. \$	0.00
		Other Spe	·-	17d. \$	0.00
18			of alimony, maintenance, and support that you did no		0.00
			your pay on line 5, Schedule I, Your Income (Official F		0.00
19.			s you make to support others who do not live with you		0.00
	Speci			19.	
20.			erty expenses not included in lines 4 or 5 of this form		
	20a.		s on other property	20a. \$	0.00_
		Real estate		20b. \$	0.00
			homeowner's, or renter's insurance	20c. \$	0.00
			nce, repair, and upkeep expenses	20d. \$	0.00
			er's association or condominium dues	20e. \$	0.00
21.	Other	r: Specify:		21. +\$	0.00
22.	Calcu	ulate your i	monthly expenses	į	
	22a. /	Add lines 4	through 21.	\$	2,241.94
	22b. (Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2 \$	
	22c. /	Add fine 22a	a and 22b. The result is your monthly expenses.	\$	2.241.94
22	Calar				
23.		•	monthly net income. 12 (your combined monthly income) from Schedule I.	23a. \$	4 976 47
			monthly expenses from line 22c above.	23b\$	<u>1,876.47</u> 2,241.94
	230.	Copy your	monthly expenses from the 22c above.	250\$	2,241.54
	23c.	Subtract v	our monthly expenses from your monthly income.		
			t is your monthly net income.	23c. \$	-365.47
	_				
24.			an increase or decrease in your expenses within the you expect to finish paying for your car loan within the year or do y		or decrease hadauna of a
			ou expect to finish paying for your car loan within the year of do y terms of your mortgage?	og exheer your morrdage bayment to increase o	r ueurease pecause bi a
	■ No		, , ,		
	□ Ye		Explain here:		
		· · ·			

Fill in this in	formation to identify y	our case:			
Debtor 1	Michael Irizarry				
D-64 D	First Name	Middle Name	Last Name	1	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA, ORLANDO DIVISION	<u> </u>	
Case number				1	
f known)		_			Check if this is an amended filing
fficial Form	n 106Dec				
		an Individua	l Debtor's Sche	dules	12/18
			M. S. W		
wo married ped	opie are filing together.	, both are equally respo	nsible for supplying correct info	rmation.	
			or amended schedules. Making		
	or property by fraud in 3 U.S.C. §§ 152, 1341, 1		kruptcy case can result in fines (up to \$250,000, or	imprisonment for up to 20
ears, or both. 10	0.3.6. 99 132, 1341, 13	515, and 557 I.			
_					
Sign	ı Below				
Did you pay	or agree to pay some	one who is NOT an atto	ney to help you fill out bankrupt	tcy forms?	
■ No					
☐ Yes. N	lame of person			Attach Bankrup	tcy Petition Preparer's Notice,
	·			Declaration, an	d Signature (Official Form 119)
	ty of perjury, I declare to true and correct.	that I have read the sum	mary and schedules filed with th	his declaration and	4
that they are	due and correct.				a
-	hael Irizarry		X		a
X <u>/s/ Mich</u> Michae			X Signature of Debtor	2	

	Fill in this information to identify your case:		
Del	otor 1 Michael Irizarry		
Del	First Name Middle Name Last Name)		
(Spo	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA, ORLANDO DIVISION		
	se number	_	k if this is an ded filing
∩f	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a Info you	is complete and accurate as possible. If two married people are filing together, both are equally responsible for rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Раг	11: Summarize Your Assets		
		Your a Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	198,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,535.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	208,535.00
Par	2: Summarize Your Liabilities		
		and the second second	abilities I you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	284,237.62
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e offichedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	4,337.53
	Your total liabilities	\$	288,575.15
Pari	Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 o Schedule I	\$	1,876.47
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,241.94
Pari	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your or the	ther schedu	les.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.	personal, fan	nily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this be court with your other schedules.	ox and subn	nit this form to the

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debt	otor 1 Irizarry, Michael	Case number (if known)	
	From the Statement of Your Current Monthly Income: Cop 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Li		\$ 3,128.92

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im de la la
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Fill in t	nis information to ident	ify your case:			
Debto	r 1	Michael Irizarry				
Debto	r 2	First Name	Middle Name	. Last Name		
	if, filing)	First Name	Middle Name	Last Name		
United	States B	ankruptcy Court for the:	MIDDLE DISTRICT OF FL	ORIDA, ORLANDO DIVISIO	NC NC	
Case I (if knowl	number n)				I —	theck if this is an mended filing
		orm 107 ot of Financial	Affairs for Individ	luals Filing for B	ankruptcy	4/16
inform	ation, If				qually responsible for supply additional pages, write your	
Part 1	Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. W	hat is yo	ur current marital statu	s?			
	l Marrie I Not m	· -				
2. Du	uring the	last 3 years, have you	lived anywhere other than w	here you live now?		
_	l No					
		ist all of the places you liv	ved in the last 3 years. Do not in	nclude where you live now.		
D	ebtor 1 F	Prior Address:	Dates Debtor 1 I	ived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					y property state or territory? co, Texas, Washington and Wis	
	No Yes. N	fake sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	ial Form 106H).		
Part 2	Expl	ain the Sources of You	r Income			
Fil	I in the to	tal amount of income yo	nployment or from operating u received from all jobs and al ave income that you receive to	l businesses, including part-		ar years?
	No					
	Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)
	st calend ary 1 to D	ar year: Jecember 31, 2018)	■ Wages, commissions, bonuses, tips	\$50,735.07	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		Operating a business	

De	ebtor 1 <u>Ir</u>	zarry, Mic	hael		Cas	e number(if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		dar year bei December :		■ Wages, commissions, bonuses, tips	\$41,226.00	☐ Wages, commission bonuses, tips	ons,
				☐ Operating a business		Operating a busine	ess
	or the calen anuary 1 to	dar year: December	31, 2016)	■ Wages, commissions, bonuses, tips	\$49,632.00	☐ Wages, commission bonuses, tips	ons,
				☐ Operating a business		Operating a busine	ess
	other publyou are fil	ic benefit pay ing a joint cas	rments; pensionse and you have and you have and you have a gross incon		vidends; money collected from gether, list it only once under [lawsuits; royalties; and g Debtor 1.	I Security, unemployment, and lambling and lottery winnings. It
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
				Made Before You Filed for B			
6.	□ No.	Neither De	abtor 1 nor De	debts primarily consumer of botor 2 has primarily consur dersonal, family, or household p	mer debts. Consumer debts a	are defined in 11 U.S.C. §	§ 101(8) as "incurred by an
		□ No. □ Yes	Go to line 7. List below ex creditor. Do payments to		a total of \$6,425* or more in o nestic support obligations, su- y case.	ne or more payments and a	•
	Yes.	Debtor 1 o	or Debtor 2 or	both have primarily consure you filed for bankruptcy, did y	mer debts.		
		■ No.	Go to line 7.				
		□ _{Yes}					nat creditor. Do not include de payments to an attorney for
	Creditor	's Name and	Address	Dates of payme	nt Total amount pald	Amount you Was	this payment for
7.	Insiders in which you	clude your re are an office	elatives; any ge r, director, per	pankruptcy, did you make a ineral partners; relatives of any son in control, or owner of 20% etor. 11 U.S.C. § 101. Include	general partners; partnership or more of their voting secur	s of which you are a gen- ities; and any managing a	eral partner; corporations of agent, including one for a
	■ No □ Yes.	l iet all naum	ents to an insi	tor.			
		Name and		Dates of paymer	nt Total amount	Amount you Reas	son for this payment

Deb	tor 1	Irizarry, Michael		Case	e number(if known)	 		
	insid	in 1 year before you filed for bankruptcy ler? de payments on debts guaranteed or cosign		nents or transfer an	y property on acc	count of a debt th	at benefited an	
	_	No Yes. List all payments to an insider						
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this Include creditor	s payment s name	
Pari	t 4:	Identify Legal Actions, Repossessions	, and Foreclosures					
	List a	in 1 year before you filed for bankruptcy ill such matters, including personal injury ca contract disputes.					ody modifications,	
		No						
		Yes. Fill in the details.						
		e title e number	Nature of the case	Court or agency		Status of the ca	ise	
		in 1 year before you filed for bankruptcy ok all that apply and fill in the details below.	, was any of your prope	rty repossessed, for	eclosed, garnish	ed, attached, seiz	ed, or levied?	
		No. Go to line 11.						
		Yes. Fill in the information below.						
	Cred	ditor Name and Address	Describe the Property		Date		Value of the property	
			Explain what happened				,	
		in 90 days before you filed for bankrupto unts or refuse to make a payment becau		ıding a bank or finaı	ncial institution, s	et off any amour	nts from your	
	_	No						
		Yes. Fill in the details. ditor Name and Address	Describe the action the	creditor took		ection was	Amount	
12.	Withi	in 1 year before you filed for bankruptcy	, was any of your proper	ty in the possession	taken n of an assignee t		creditors, a	
		t-appointed receiver, a custodian, or and						
	_	No						
	LL '	Yes						
Part	t 5:	List Certain Gifts and Contributions						
3.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No							
		Yes. Fill in the details for each gift.						
	Gifts pers	s with a total value of more than \$600 pe on	r Describe the gifts		Dates the gi	you gave fts	Value	
		on to Whom You Gave the Gift and ress:						
4.	Withi	n 2 years before you filed for bankruptc	y, did you give any gifts	or contributions wit	h a total value of	more than \$600 t	to any charity?	
		No						
	□ '	Yes. Fill in the details for each gift or contrib	ution.				*	
	more Chai	s or contributions to charities that total e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)	Describe what you	contributed	Dates contri		Value	
David		· •						
		List Certain Losses						
5 1	Withi	n 1 year before you filed for bankruptcy	or since you filed for ba	nkruntev, did vou le	se anything beca	use of theft, fire.	other disaster.	

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1	Irizarry, Michael		Case number (i	f known)	
	or ga	ambling?				
		No				
		Yes. Fill in the details.				
		cribe the property you lost and	Describe any insurance coverage for the I	088	Date of your	Value of property
	how	v the loss occurred	Include the amount that insurance has paid, insurance claims on line 33 ofSchedule A/B:		loss	lost
Pa	rt 7:	List Certain Payments or Transfers	s			
16.	cons	sulted about seeking bankruptcy or p	ptcy, did you or anyone else acting on your preparing a bankruptcy petition? eparers, or credit counseling agencies for service			y to anyone you
		No				
	_	Yes. Fill in the details.				
	Add Ema	son Who Was Paid Iress ail or website address son Who Made the Payment, if Not Y	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	Lav 911	v Office of Flavio E. Alvarez N Main St Ste 8 simmee, FL 34744-4520			1/25/19	\$1,500.00
17.	prom Do no	nised to help you deal with your cred ot include any payment or transfer that you	ptcy, did you or anyone else acting on your litors or to make payments to your creditor ou listed on line 16.		transfer any propert	y to anyone who
•		Yes. Fill in the details.				
		son Who Was Paid ress	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	trans Includ	ferred in the ordinary course of you	made as security (such as the granting of a sec		•	• •
		No				
		Yes. Fill in the details.				
		son Who Received Transfer ress	Description and value of property transferred	Describe a payments paid in exc	ny property or received or debts hange	Date transfer was made
	Pers	son's relationship to you			-	
19.		in 10 years before you filed for bank ficiary? (These are often called asset-	ruptcy, did you transfer any property to a so protection devices.)	elf-settled trus	t or similar device of	which you are a
	_	No				
		Yes. Fill in the details.	B			Data Was a
	Nam	e of trust	Description and value of the prop	eny transferre	ס	Date Transfer was made

De	btor	1 <u>Iri</u> z	zarry, Michael			Case nu	mber (if known)	<u> </u>	
Pa	rt 8:	List	of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and St	orage Unit	s		
20.	sol Inc	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.								
				Last 4 digits of	Last 4 digits of Type of acco		Date account was	Last balance before	
	Address (Number, Street, City, State and ZIP Code)			account number	· · · · · · · · · · · · · · · · · · ·		closed, sold, moved, or transferred	closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
		No							
		☐ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Who else had access to it? Describe Address (Number, Street, City, State and ZIP Code)			Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
		No Yos	Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Storage Facility	to it?	Address (Number, Street, City, State			Do you still have it?	
Pa	rt 9:	Ider	ntify Property You Hold or Control	,					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
		No							
	Yes. Fill in the details.								
		mer's dress	Name (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe	a the property	Value	
Pa	rt 10:	Give	e Details About Environmental Info	ormation					
For	the p	ourpos	e of Part 10, the following definition	ons apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardou material, pollutant, contaminant, or similar term.								
Rep	ort a	ll notic	es, releases, and proceedings tha	t you know about, reg	ardless of when	they occur	rred.		
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
		No							
		Yes.	Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)			Governmental u Address (Number, ZIP Code)		_	ronmental law, if you v it	Date of notice	

Del	otor 1	Irizarry, Michael		Case number (if known)				
25.	Have	you notified any governmental unit of	any release of hazardous material?					
		No						
	□ 1	es, Fill in the details.						
		e of site ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have	vou been a party in any judicial or adπ	ninistrative proceeding under any enviro	onmental law? Include settlements a	nd orders.			
	_	,						
	_	No						
		Yes, FIII in the details.		Notes of the	0 4-4 5 41			
) Title) Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pai	t 11:	Give Details About Your Business or C	Connections to Any Business					
27.	Within	n 4 years before you filed for bankrupto	cy, did you own a business or have any	of the following connections to any	business?			
	_	_ *	a trade, profession, or other activity, e	•				
			any (LLC) or limited liability partnership					
	_	_	any (EEC) or innited liability partitership	(LLF)				
		A partner in a partnership						
	E	☐ An officer, director, or managing exe	cutive of a corporation		·			
	[\square An owner of at least 5% of the voting	or equity securities of a corporation					
		No. None of the above applies. Go to Pa	art 12.					
	□ Y	es. Check all that apply above and fill	in the details below for each business.					
	Business Name Describ		Describe the nature of the business	· · · · · · · · · · · · · · · · · · ·				
	Addr (Numb	ess er, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.			
28	Within	n 2 years before you filed for bankrupto	cy, did you give a financial statement to	anyone about your business? Inclu-	de all financial			
		itions, creditors, or other parties.	y, a.a. j o 2 g. 1 a 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	anythe antaty our business more	ao an illianoiai			
	.	No						
	_ `	res. Fill in the details below.						
	Name	9	Date Issued					
	Addr	ess er, Street, City, State and ZIP Code)						
Par	t 12.	Sign Below						
true bani	and co cruptey	orrect. I understand that making a false	ncial Affairs and any attachments, and I statement, concealing property, or obta 0, or imprisonment for up to 20 years, or	aining money or property by fraud Ir				
/s/	Micha	iel Irizarry						
		Irizarry	Signature of Debtor 2					
Sig	nature	of Debtor 1						
Dat	е <u>Ja</u>	nuary 28, 2019	Date					
Did	ou att	ach additional pages to Your Statemen	nt of Financial Affairs for Individuals Filin	ng for Bankruptcy (Official Form 107)?			
■ N	a							
	es							
Did y		y or agree to pay someone who is not a	an attorney to help you fill out bankrupt	cy forms?				
		me of Person Attach the Bankrup	tcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119),				
		107 Stateme	ent of Financial Affairs for Individuals Filing f	for Bankruptcy	page 6			

Fill in th	is information to identi	fy your case:			
Debtor 1					
Debior	Michael Irizarry First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	MIDDLE DISTRIC	T OF FLORIDA, ORLANDO DIVISION		
	,				
Case number (if known)				Check if this is an amended filing	
Official Fo	rm 108				
		n for Indiv	viduals Filing Under Chapte	er 7 12/15	
If you are an indi	vidual filing under chap	oter 7, you must fill	out this form if:		
creditors have	e claims secured by you	ır property, or			
You must file this	ver is earlier, unless the	ithin 30 days after y	t expired. ou file your bankruptcy petition or by the date set i time for cause. You must also send copies to the c		
	ople are filing together te the form.	in a joint case, both	n are equally responsible for supplying correct info	rmation. Both debtors must sign	1
	and accurate as possible our name and case num		needed, attach a separate sheet to this form. On the	top of any additional pages,	
Part 1: List Yo	our Creditors Who Have	Secured Claims			
			Cardia and Miles Uses Claims Comment to Day of the	DESI-1-1 F 400D) SUL1-4	
information be	low.	1,111	Creditors Who Have Claims Secured by Property (
identify the cre	editor and the property the	iat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's S	elect Portfolio Servi	cina. Inc	Surrender the property.	■ No	
name:		g,s	☐ Retain the property and redeem it.	■ NO .	
Description of	441 Acacia Tree W	lav	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes	
property securing debt:	Kissimmee, FL 34		Retain the property and [explain]:		
occurring accur				-	
	our Unexpired Personal			(0.00) (5	_
the information b	elow. Do not list real es	tate leases. Unexpi	n Schedule G: Executory Contracts and Unexpired ired leases are leases that are still in effect; the leas istee does not assume it. 11 U.S.C. § 365(p)(2).		
Describe your u	nexpired personal prop	erty leases		Will the lease be assumed?	
Lessor's name:				□ No	
Description of lease Property:	sed			☐ Yes	
Lessor's name:				□ No	
Description of lease Property:	s e a			☐ Yes	
Lessor's name:				□ No	
Official Form 108		Statement of Int	ention for Individuals Filing Under Chapter 7	pag	e 1

Case 6:19-bk-00531-KSJ Doc 1-1 Filed 01/28/19 Page 39 of 50

Debtor 1	Irizarry, Michael	Case number (if known)	
Descrinti	ion of leased		
Property:		☐ Yes	
Lessor's		□ No	
Descripti Property:	ion of leased	☐ Yes	
Lessor's		□ No	
Property:	ion of leased	☐ Yes	
Lessor's	name: ion of leased	□ No	
Property:		☐ Yes	
Lessor's		□ No	
Property:	ion of leased :	□ Yes	
Part 3:	Sign Below		
	enalty of perjury, I declare that I have indicated my intention abouthat is subject to an unexpired lease.	ut any property of my estate that secures a debt and any perso	onal
X /s/	Michael Irizarry	x	
	chael Irizarry nature of Debtor 1	Signature of Debtor 2	
Date	e <u>January 28, 2019</u>	Date	

Fill i	in this information to identify your case:				irected in this form and in Form
Deb [.]	otor 1 Michael Irizarry	12	2A-1St	fbb:	
	otor 2		1 . 7	here is no presi	umption of abuse
	Middle District of Florida, Orlando eled States Bankruptcy Court for the: Division		á	applies will be m	o determine if a presumption of abuse nade underChapter 7 Means Test
		_	_	•	cial Form 122A-2).
(if kno	e number				does not apply now because of qualified ut it could apply later.
			☐ Ch	eck if this is a	n amended filing
Off	ficial Form 122A - 1				
Ch	apter 7 Statement of Your Current Mon	thly Inc	ome	9	12/15
a sepa numb milita Parit		nation applies. se because yo	On the u do no	top of any additi t have primarily (onal pages, write your name and case consumer debts or because of qualifying
1.	What is your marital and filing status? Check one only.			•	
	Not married. Fill out Column A, lines 2-11.				i
	Married and your spouse is filing with you. Fill out both Columns A	•	2-11.		
	Married and your spouse is NOT filing with you. You and your sp				
	Living in the same household and are not legally separated. Fil				
	Living separately or are legally separated. Fill out Column A, line penalty of perjury that you and your spouse are legally separated une apart for reasons that do not include evading the Means Test require	der nonbankru	ptcy law	v that applies or	
10 6 i	ill in the average monthly Income that you received from all sources, derived on 01(10A). For example, if you are filing on September 15, the 6-month period would be months, add the income for all 6 months and divide the total by 6. Fill in the result. If which same rental property, put the income from that property in one column only. I	e March 1 throu To not include a	igh Augi าy incon	ust 31. If the amou ne amount more ti	ant of your monthly income varied during the nan once. For example, if both spouses
			Colum Debto		Column 8 Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commission payroll deductions).	s (before all	\$	3,128.92	\$
3.	Alimony and maintenance payments. Do not include payments from a Column B is filled in.	spouse if	\$	0.00	\$
4.	All amounts from any source which are regularly paid for household of you or your dependents, including child support. Include regular of from an unmarried partner, members of your household, your dependents, roommates. Include regular contributions from a spouse only if Column EDo not include payments you listed on line 3	ontributions parents, and	1. \$	0.00	\$
5.	Net income from operating a business, profession, or farm				
	Debt	tor 1			
	Gross receipts (before all deductions) \$0.00				}
	Ordinary and necessary operating expenses -\$ 0.00	Copy here ->	¢	0.00	\$
6		Copy liere ->	—	0.00	*
6.	Net income from rental and other real property Debt	tor 1			
	Gross receipts (before all deductions) \$ 0.00				
	Ordinary and necessary operating expenses -\$ 0.00				ł
		Copy here ->	\$	0.00	\$
	Interest, dividends, and royalties		\$	0.00	\$

Debtor	ı Irizarry, Michael			Case numbe	r (if knawn)			
0	Unemployment compensation			Column A Debtor 1	0.00	Column B Debtor 2 or non-filing spr	ouse	
,	Do not enter the amount if you contend that the amount re	eceived was a benefit ur	nder the		0.00	Ψ	 -	
;	Social Security Act. Instead, list it here:	0.0	.					,
	For you \$ For your spouse \$		<u> </u>					
	Pension or retirement Income. Do not include any amounder the Social Security Act.	unt received that was a	benefit	\$	0.00	\$		
	Income from all other sources not listed above. Specinot include any benefits received under the Social Securita victim of a war crime, a crime against humanity, or inter if necessary, list other sources on a separate page and process.	ly Act or payments receinational or domestic teri	ived as			 .		
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$ 3	,128.92	* s	=	\$ 3,12	28.92
Part :	Determine Whether the Means Test Applies to	You			<u>-</u>		I I COMB	
12.	Calculate your current monthly income for the year.	Follow these steps:				г		
	12a. Copy your total current monthly income from line 1	1		Сору	/ line 11 h	ere=>	\$3,1:	28.92
	Multiply by 12 (the number of months in a year)					_	x 12	
	12b. The result is your annual income for this part of the	form				12b.	\$37,54	17.04
13. (Calculate the median family income that applies to y	ou. Follow these steps:						
1	Fill in the state in which you live.	FL						
;	Fill in the number of people in your household.	1						
-	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of form. This list may also be available at the bankruptcy of	online using the link spe		the separat			\$48,00	00.00
14. 1	How do the lines compare?							
	Line 12b is less than or equal to line 13. Or Go to Part 3.	the top of page 1, che	ck box 17	here is no p	resumptio	n of abuse.		
•	14b. Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.	f page 1, check box 27,7	ne presur	nption of ab	use is dete	ermined by Form	1 122A-2.	
Part 3	Sign Below							
	By signing here, I declare under penalty of perjury th	at the information on thi	s statem	ent and in ar	y attachm	ents is true and	correct.	
	X /s/ Michael Irizarry Michael Irizarry Signature of Debtor 1							
	Date January 28, 2019							
	MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form	122A-2						
	If you checked line 14b, fill out Form 122A-2 and fill							

United States Bankruptcy Court Middle District of Florida, Orlando Division

IN RE:		Case No.
Irizarry, Michael		Chapter 7
	Debtor(s)	•
	VERIFICATION OF CREDITOR	MATRIX
The above named debtor(s) hereb	y verify(ies) that the attached matrix listing	creditors is true to the best of my(our) knowledge.
Date: January 28, 2019	Signature: /s/ Michael Irizarry	
	Michael Irizarry	Debtor
Date:	Signature:	
		Joint Debtor, if any

Association of Poinciana Villages, Inc. c/o Larsen & Assoc., P.L. 300 S Orange Ave Ste 1575 Orlando, FL 32801-3348

Awa Collections PO Box 6605 Orange, CA 92863-6605

Capital One Attn: General Correspondence/Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Credit Collection Serv 725 Canton St Norwood, MA 02062-2679

Credit One Bank ATTN: Bankruptcy PO Box 98873 Las Vegas, NV 89193-8873

FCI Lender Services, Inc. PO Box 27370 Anaheim, CA 92809-0112 First Premier Bank
Attn: Bankruptcy
PO Box 5524
Sioux Falls, SD 57117-5524

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107-0145

Fox Collection Center 454 Moss Trl Goodlettsville, TN 37072-2029

I C Systems, Inc. PO Box 64378 Saint Paul, MN 55164-0378

Select Portfolio Servicing, Inc Attn: Bankruptcy PO Box 65250 Salt Lake City, UT 84165-0250

Select Portfolio Svcin 10401 Deerwood Park Blvd Jacksonville, FL 32256-5007

The Law Office of Paul A. Krasker, P.A. 1615 Forum Pl Fl 5 West Palm Beach, FL 33401-2320 B201B (Form 201B) (12/09)

United States Bankruptcy Court Middle District of Florida, Orlando Division

IN RE:	(Case No.
Irizarry, Michael	(Chapter 7
Debtor(s)		
CERTIFICATION OF NOT UNDER § 342(b) OF	FICE TO CONSUMER DE THE BANKRUPTCY CO	
Certificate of [Non-Attorn	ney] Bankruptcy Petition P	reparer
l, the [non-attorney] bankruptcy petition preparer signing the d notice, as required by § 342(b) of the Bankruptcy Code.	ebtor's petition, hereby certify	that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	pe th ps	ocial Security number (II the bankruptcy etition preparer is not an individual, state e Social Security number of the officer, incipal, responsible person, or partner of
x		e bankruptcy petition preparer.) Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal partner whose Social Security number is provided above.	responsible person, or	
Certific	ate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read	the attached notice, as required	by § 342(b) of the Bankruptcy Code.
Irizarry, Michael	X /s/ Michael Irizarry	1/28/2019
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X Signature of Joint Deb	
	Signature of Joint Deb	otor (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75_	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
<u>+</u>	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers.

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida, Orlando Division

In re	frizarry, Michael		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPI	ENSATION OF ATTORNE	Y FOR D	EBTOR			
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy, or agr	eed to be paid	d to me, for services	that rendered or to		
			\$	1,500.00			
	Prior to the filing of this statement I have received.		\$	1,500.00			
	Balance Due		<u> </u>	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	I have not agreed to share the above-disclosed comp firm.	ensation with any other person unless	they are men	nbers and associates	of my law		
	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the national states.				y law firm. A		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
1	a. Analysis of the debtor's financial situation, and render Department on the debtor at the meeting of credited. [Other provisions as needed]	ement of affairs and plan which may b	e required;	•	nkruptey;		
6.	By agreement with the debtor(s), the above-disclosed fe	e does not include the following service	e:				
		CERTIFICATION					
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for payme	ent to me for i	representation of the	e debtor(s) in		
<u>J</u> .	anuary 28, 2019	/s/ Flavio Alvarez					
D	ate	Flavio Alvarez					
		Signature of Attorney Law Office of Flavio E. I	Alvarez				
		911 N Main St Ste 8					
		Kissimmee, FL 34744-4		_	ĺ		
		(407) 870-0015 Fax: (40 alvareziaw8@gmail.com		1	1		
		Name of law firm	<u> </u>				